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W. William

COVER LETTER

TO:

Registration Section
Division of Corporations

SHRIECT

JAZBROWHOMES, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:



Name of Person

Firm/Company

3001 W. Hallandale Beach Blvd #300

Address

Pembroke Park, FL 33009

City/State and Zip Code

elori976@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lori English

954₉81-1154

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JAZBROWHOMES, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(Λ	l·lorida Limited Lia	bility Company)	
The Articles of Organization for this Limited Lia Florida document number L13000002170	ability Company w	rere filed on January 4, 20°	and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liabili	ty company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited	d Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	(ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>80X)</u>		
B. If amending the registered agent and/o registered agent and/or the new registered off		ce address on our records,	enter the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida str	eet address
		, Flor	
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Title** <u>Name</u> <u>Address</u> **Type of Action** Lori English MGR 3001 W. Hallandale Beach Blvd #300 Pembroke Park, FL 33009 Remove Remove

). If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
ated June	e 6 2013
	Signature of a member or authorized representative of a member
	Sam Jazayri, Member
	Typed or printed name of signee

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Filing Fee: \$25.00

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